

California Department of Child Support Services

DCSS Survey of County Contracting Practices October 2001

The Department of Child Support Services (DCSS) is conducting this survey to identify opportunities to save money and time at the local level, while improving program performance, by contracting for some services on a *statewide* basis. Your help is needed to determine the feasibility and potential savings of a statewide contracting initiative.

Instructions: This survey has been created using Microsoft Word. This electronic form is intended to be easy to use and navigate, and provides many user-friendly options for data entry and navigation.

Your cursor will automatically appear below, in the highlighted box to the right of **Name**. As you complete data entry of each highlighted field, simply use your tab key or mouse to move to the next highlighted field. You will encounter the following fields during your data entry session:

Choose one of the following:

Click on the field or down-arrow to display the list of possible choices. Using your mouse, click on your selected response.

☐

Clicking on the checkbox will insert an X in the box, or you may type an X in the box. If an X already appears in the box, clicking on the X will delete it.

Select one:

Click on the field or down-arrow to display the list of possible choices – **Yes** or **No**. Use your mouse to click on the answer that applies to your agency.

When completing fields that request dollar amounts, please enter whole dollars, without commas or decimal points.

Please call Ira Androphy at (916) 464-5513 if you have questions or difficulties completing this survey. When you have finished entering your responses, save the file electronically and return it by e-mail to Ira.Androphy@dcss.ca.gov no later than November 2, 2001.

Thank you for your cooperation and assistance.

SECTION 1: COUNTY INFORMATION

Please complete the following information.

1-1. Your Name:

1-2. Title:

1-3. County:

1-4. Date: (please enter in mm/dd/yy format)

SECTION 2: GENETIC TESTING

- 2-1. Which vendor(s) does your county currently use for genetic/paternity testing?
(check all that apply)
- ☐ GeneScreen
☐ LabCorp
☐ Long Beach Genetics
☐ Other - Please specify:
- 2-2. Is the vendor recognized as a: (check all that apply)
- ☐ Disabled Veteran Business Enterprise
☐ Certified Small Business
☐ Target Area Contract Preference Act (TACPA) participant
☐ Enterprise Zone Act (EZA) participant
☐ Local Agency Military Base Recovery Act Area (LAMBRAA) participant
☐ Other – please specify:
- 2-3. How much money did you budget this year for genetic testing?
- 2-4. How much money did you spend last year for genetic testing?
- 2-5. In total, how many genetic tests were performed last year?
- 2-6. Of these tests, how many “Motherless” tests were performed last year? [Motherless testing is defined as one child and one alleged father.]
- 2-7. What are the total costs for genetic testing when the tests are for:
Mother, Father, Child:
Father, Child:
- Comments:
- 2-8. What type(s) of specimen collection are performed? (check all that apply)
- ☐ Buccal Swab
☐ Blood Draw

SECTION 2: GENETIC TESTING (continued)

2-9. If such statistics are available, what is the number or percentage of draws that are buccal vs. blood draw?

2-10. Does your county court specify the method of specimen collection? Select one:

*If you checked **Yes**, please explain:*

2-11. Do you have a local policy on this issue, e.g. buccal swab for children under 1 year?

2-12. Where is the genetic test specimen drawn?

Choose one of the following:

*If you checked **At County Office(s)**, how often are they done:*

Choose one of the following:

*If you checked **Other**, please explain:*

SECTION 2: GENETIC TESTING (continued)

- 2-13. What personnel performs the specimen draw?
Choose one of the following:

*If you checked **Other**, please explain:*

- 2-14. What is the expected turn-around time in days from the date the sample is collected to the date genetic results are received by the county?

Comments:

- 2-15. Does the county's contract allow for contract termination in 30 days or less without requiring cause? Select one:

- 2-16. Please describe any special contractual arrangements you have with the vendor.

- 2-17. How often are you invoiced by the vendor? Choose one of the following:

SECTION 2: GENETIC TESTING (continued)

2-18. Please describe how you verify the accuracy of the vendor's invoices.

2-19. How would you rate the vendor's performance? Select one:

Comments:

2-20. How do you evaluate the quality of service provided by the vendor?

SECTION 2: GENETIC TESTING (continued)
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2-21. Any other comments regarding genetic testing that you would like to provide?
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SECTION 3: SERVICE OF PROCESS

- 3-1. Do you contract with the County Sheriff's Office or any other local law enforcement agency for service of process? Select one:

*If you checked **Yes**, please provide costs:*

Successful Service:

Unsuccessful Service:

Rush Service:

- 3-2. Does your service vendor provide for all of your service of process needs (in county, in state, out of state, and international)? Select one:

*If you checked **Yes**, please provide the following vendor information, and then proceed to question #3-6.*

Name:

Address:

Contact Name:

Telephone #:

- 3-3. For process serves within your county, do you have contracts with more than one vendor? Select one:

*If you checked **No**, please provide the following vendor information:*

Name:

Address:

Contact Name:

Telephone #:

SECTION 3: SERVICE OF PROCESS (continued)

3-3. (continued)

*If you checked **Yes**, please provide the names of the three you use most frequently within your county:*

Vendor #1

Name:

Address:

Contact Name:

Telephone #:

Vendor #2

Name:

Address:

Contact Name:

Telephone #:

Vendor #3

Name:

Address:

Contact Name:

Telephone #:

SECTION 3: SERVICE OF PROCESS (continued)

- 3-4. For process serves outside of your county, but within California, do you have contracts with more than one vendor? Select one:

*If you checked **No**, please provide the name of the vendor, and address information if the vendor's address information has not been previously supplied, and then proceed to question #3-5.*

Name:

Address:

Contact Name:

Telephone #:

*If you checked **Yes**, are these vendors the same as those used for within your county?*

Select one:

*If you checked **No**, please provide the following vendor information of the three you use most frequently outside your county:*

Vendor #1

Name:

Address:

Contact Name:

Telephone #:

Vendor #2

Name:

Address:

Contact Name:

Telephone #:

Vendor #3

Name:

Address:

Contact Name:

Telephone #:

SECTION 3: SERVICE OF PROCESS (continued)

- 3-5. Does your county have contracts or agreements with process servers in other states?
Choose one of the following:

*If you checked **Yes – one vendor**, please provide the name of the vendor.*

Name:

Address:

Contact Name:

Telephone #:

*If you checked **Yes – multiple vendors**, please provide name(s) of vendors:*

Vendor #1

Name:

Address:

Contact Name:

Telephone #:

Vendor #2

Name:

Address:

Contact Name:

Telephone #:

Vendor #3

Name:

Address:

Contact Name:

Telephone #:

SECTION 3: SERVICE OF PROCESS (continued)

3-6. Does your county use a unique vendor for international service of process? Select one:

*If you checked **Yes**, please provide name(s) of vendors:*

Vendor #1

Name:

Address:

Contact Name:

Telephone #:

Vendor #2

Name:

Address:

Contact Name:

Telephone #:

Vendor #3

Name:

Address:

Contact Name:

Telephone #:

SECTION 3: SERVICE OF PROCESS (continued)

3-7. Does your county use other methods for service of process? Select one:
*If you checked **Yes**, please explain:*

3-8. How much did your county budget last year for service of process?

Comments:

3-9. How much did your county spend last year for service of process?

Comments:

3-10. In the previous fiscal year, how many process serves were requested:

Within your county?

Within California, but outside your county?

Outside California, but within the USA?

Outside of the USA?

In total?

Comments:

SECTION 3: SERVICE OF PROCESS (continued)

3-11. What is the fee associated with successful service:

Within your county?

Within California, but outside your county?

Outside California, but within the USA?

Outside of the USA?

Comments:

Rush services?

Locate services?

Other 1(Service Type/Cost)?

Other 2(Service Type/Cost)?

Please specify others if necessary:

3-12. Do you pay when service is not successful? Select one:

*If you checked **Yes**, what is the associated fee?*

3-13. Do you have an automated tracking system for your service of process? Select one:

Comments:

SECTION 3: SERVICE OF PROCESS (continued)

- 3-14. Does the county's contract allow for contract termination in 30 days or less without requiring cause? Select one:
- 3-15. Please describe any special contractual arrangements you have with the vendor(s).
- 3-16. How often does the vendor invoice you? Choose one of the following:
- 3-17. Please describe how you verify the accuracy of vendor invoices.
- 3-18. How would you rate the performance of your 5 most frequently used service of process vendors?
- | | |
|----------------|-------------|
| Vendor 1 Name: | Select one: |
| Vendor 2 Name: | Select one: |
| Vendor 3 Name: | Select one: |
| Vendor 4 Name: | Select one: |
| Vendor 5 Name: | Select one: |
- Comments:

SECTION 3: SERVICE OF PROCESS (continued)
3-19. How do you evaluate the quality of service provided by your vendor?
3-20. Any other comments regarding process of service that you would like to provide?

SECTION 4: OTHER CONTRACTING OPPORTUNITIES

4-1. Do you contract out any of your locate services? Select one:

*If you checked **Yes**, please explain:*

4-2. Do you contract out for case processing services? Select one:

*If you checked **Yes**, please explain:*

4-3. Do you contract out for training services? Select one:

*If you checked **Yes**, please explain:*

SECTION 4: OTHER CONTRACTING OPPORTUNITIES

- 4-4. Do you believe there are other service contracts that could benefit from statewide administration? If so, please comment.

AGAIN, THANKS FOR YOUR HELP!